# U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards Administration Washington, DC 20210 LM-2 LABOR ORGANIZATION ANNUAL REPORT MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN

MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

Form Approved Office of Management and Budget No. 1215-0188 Expires: 07-31-2004

For Official Use Only 1. FILE NUMBER 2. PERIOD COVERED MO DAY YEAR filed report, check here:    O 0 0 - 3 1 4   From 0 1 0 1 2 0 0 2   From 1 2 0 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0
MO DAY YEAR filed report, check here:    Do 0 - 3   4   From   D 1   D 1   2   D 0   2   (b) TERMINAL   If your organization ceased to exist and this is its terminal report are Section VII of the instructions and check here:
Through 1 2 3 1 2 0 0 3 (c) SUBSIDIARY — If this is a report for a subsidiary organization of
E your union as defined in Section X of the instructions, check nere:
First Name  DAN  Last Name  JOHNSON  P.O. Box · Building and Room Number (if any)  4. AFFILIATION OR ORGANIZATION NAME  LINITED TRANSPORTATION UNION  Number and Street
5. DESIGNATION (Local, Lodge, etc.)  6. DESIGNATION NUMBER  City
7. UNIT NAME (if any)
9. Are your organization's records kept at its mailing address? Yes No D O H ZiP Code + 4  O H 4 4 1 0 7 - 4 2 5 0
75. ADDITIONAL INFORMATION
Item Number
Each of the undersigned, duty Juthorized officers of the above labor organization, declares, under the applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents been examined by the applicable penalties of the undersigned sknowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.)
accompanying documents has been examined by the surfatory and s, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.)  76.  SIGNED:  (If other title, see instructions.)  Date  Telephone Number  Telephone Number  TREASURER  (If other title, see instructions.)  Date  Telephone Number

During the Reporting Period Did Your Organization:  10. Have a "subsidiary organization" as defined in Section X of the instructions?	Yes	No X	18. How many members did your organization have at the end of the reporting period?  19. What is the date of your organization's next regular election of officers?  18. How many members did your organization to the many members did your org
Create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries?	X		20. What is the maximum amount recoverable under your organization's fidelity bond for a loss caused by any officer or employee of your organization?  1 0 0 0 0 0
12. Have a political action committee (PAC) fund?		X	21. What are your organization's rates of dues and fees?  (Enter a minimum and maximum if more than one rate applies for any line.)
13. Acquire or dispose of any goods or property in any manner other than by purchase or sale?		X	(a) Regular Dues/Fees  Rates of Dues and Fees  20.50 per MONTHLY  (Month, Year, etc.)
14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?	X		(b) Initiation Fees  \$0  (c) Transfer Fees  \$0
15. Discover any loss or shortage of funds or other property?		X	(d) Work Permits
<ul> <li>(Answer "Yes" even if there has been repayment or recovery.)</li> <li>16. Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan?</li> </ul>		X	22. During the reporting period, did your organization have any changes in its constitution and bylaws (other than rates of dues and fees) or in practices/ procedures listed in the instructions?
17. Liquidate or reduce any liabilities without disbursement of cash?		X	23. Were any of your organization's assets pledged as security or encumbered in any other way at the end of the reporting period?
			24. Did your organization have any contingent liabilities at the end of the reporting period?
(If the answer to any of the above questions is "Yes," principal in Item 75 as explained in the instructions for each item.		tails	(If the answer to Item 23 or 24 is "Yes," provide details in Item 75.)

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#### Complete Schedules 1 Through 15 Before Completing Statement A

Enter Amounts in Dollars Only -- Do Not Enter Cents

	ASSETS Item	From SCH #	Start of Reporting Period (A)	End of Reporting Period (B)
	25. Cash		4 0 7 1 2 0 5	2 4 5 2 4 2 0
	26. Accounts Receivable		0	0
STI	27. Loans Receivable	1	0	0
ASSETS	28. U.S. Treasury Securities		9765460	5 0 4 9 2 0
	29. Investments	2	1 5 7 3 5 8 9 6	1 9 2 0 1 7 8 9
	30. Fixed Assets	5	2 2 0 8 2 6 4	2 1 4 3 8 6 4
	31. Other Assets	3	5 1 1 1 2 2	4 5 9 9 3 8
	32. TOTAL ASSETS		3 2 2 9 1 9 4 7	2 4 7 6 2 9 3 1
	LIABILITIES Item	From SCH #	Start of Reporting Period (C)	End of Reporting Period (D)
	33. Accounts Payable		0	0
lES .	34. Loans Payable	8	0	0
LIABILITIES	35. Mortgages Payable		0	0
LA	36. Other Liabilities	4	7 3 9 5 3	5 4 0 8 7
	37. TOTAL LIABILITIES		7 3 9 5 3	5 4 0 8 7
	38. NET ASSETS (Item 32 less Item 37)		3 2 2 1 7 9 9 4	2 4 7 0 8 8 4 4

FILE NUMBER: 0 0 0 - 3 1 4

#### Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only -- Do Not Enter Cents

			Litter Amounts in i		3 Omy DO NOT Enter Ochts
CASH RECEIPTS	From SCH #	AMOUNT	CASH DISBURSEMENTS	From SCH #	AMOUNT
39. Dues		0	56. To Officers	9	2806941
40. Per Capita Tax		1 6 4 6 8 3 2 2	57. To Employees	10	5775845
41. Fees		0	58. Per Capita Tax		8 5 9 9 8
42. Fines		0	59. Fees, Fines, Assessments, etc		1 5 7 9 7
43. Assessments		0	60. Office & Administrative Expense	13	3 7 5 4 5 1 1
44. Work Permits		0	61. Educational & Publicity Expense		5 0 7 7 3 8
45. Sale of Supplies		8 0 5 2 0	62. Professional Fees		2 0 2 0 0 3 1
46. Interest		1 6 0 1 3 5 3	63. Benefits	11	1 0 7 3 1 1 4 0
47. Dividends		1 0 3 7 5	64. Contributions, Gifts & Grants	12	1 6 6 5 0
48. Rents		0	65. Supplies for Resale		1 3 1 6 3 6
49. Sale of investments & Fixed Assets	6	1 4 7 7 9 4 5 7	66. Direct Taxes		1 6 9 3 5 1 2
50. Loans Obtained	8	0	67. Withholding Taxes.		3 3 6 7 4 3 5
	1	0	68. Purchase of Investments & Fixed Assets	7	0
<ul><li>51. Repayments of Loans Made</li><li>52. On Behalf of Affiliates for</li></ul>	'	9698368		1 1	0
Transmittal to Them53. From Members for		2 6 9 3 4 5 9 7	69. Loans Made	8	0
Disbursement on Their Behalf	14	2 4 8 6 7 1 9 5	<ul><li>70. Repayment of Loans Obtained</li><li>71. To Affiliates of Funds</li></ul>	0	9698368
54. Other Receipts	14	2 4 0 0 7 1 0 0	Collected on Their Behalf		28247953
			72. On Behalf of Individual Members		28784730
		0.4.4.0.4.0.7	73. Other Disbursements	15	
55. TOTAL RECEIPTS		9 4 4 4 0 1 8 7	74. TOTAL DISBURSEMENTS		9 7 6 3 8 2 8 5

#### Enter Amounts in Dollars Only -- Do Not Enter Cents

#### **SCHEDULE 1-LOANS RECEIVABLE**

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to	Loans		Repayments Recei	ved During Period	Loans
business enterprises regardless of amount.  (A)	terprises regardless of amount. Start of Period During Period Cash		Cash (D)(1)	Other Than Cash (D)(2)	Outstanding at End of Period (E)
1.					
2.					
3.					
İ					
4. Totals from additional pages (if any)					
5. Totals of loans not listed above	0	0	0	0	
6. Totals of Lines 1 through 5	0	0	0	0	
The totals from Line 6 are entered in		Item 69	ltem 51	ltem 75	Item 27 Column (B)

FILE NUMBER: 0 0 0 - 3 1 4

#### **SCHEDULE 2 - INVESTMENTS** (OTHER THAN U.S. TREASURY SECURITIES)

#### **SCHEDULE 3 - OTHER ASSETS**

Description (A)			Α	mou (B)				
Marketable Securities  1. Total Cost	1	9	2	0	1	7	8	9
2. Total Book Value	1	9	2	0	1	7	8	9
List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.								
(a) INDUSTRIAL & FINANCE			9	3	6	9	0	4
(b) REVENUE & SPEC OBLIGATION	1	7	9	5	7	1	4	6
(c) STOCKS			3	0	7	7	3	9
(d)								
Other Investments 4. Total Cost								0
5. Total Book Value	***************************************							0
List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.								
(a) None								0
(b)								
(c)								
(d)								
(e) Total from additional pages (if any)								
7. Total of Lines 2 and 5	1	9	2	0	1	7	8	9
The total from Line 7 is entered in		1	tem	29,	Colu	mn	(B)	
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Description (A)	Book Value (B)	
1. POSTAGE	2 9 0	8
2. INVENTORY RESALE	4 5 7 0 3	0
3.		
4.		
5.		
6. Total from additional pages (if any)		
7. Total of Lines 1 through 6	4 5 9 9 3	8
The total from Line 7 is entered in	ltem 31, Column (B)	l

#### SCHEDULE 4 - OTHER LIABILITIES

Description (A)	Amount at End of Period (B)								
1. TAXES	5 4 0 8 7								
Ž.									
3.									
4.									
5.									
6. Total from additional pages (if any)									
7. Total of Lines 1 through 6	5 4 0 8 7								

## SCHEDULE 5 - FIXED ASSETS

FILE NUMBER: 0 0 0 - 3 1 4

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (give location): None	0		0	0
2. Totals from additional pages (if any)				
3. Buildings (give location): WASHINGTON DC	1883009	199492	1 6 8 3 5 1 7	1620000
4. Totals from additional pages (if any)	5 1 4 8 2 3	5 4 4 7 6	4 6 0 3 4 7	514000
5. Automobiles and Other Vehicles	600408	600408	0	0
6. Office Furniture and Equipment	0	0	0	0
7. Other Fixed Assets	0	0	0	0
8. Totals of Lines 1 through 7	2998240	854376	2 1 4 3 8 6 4	2134000
The total from Line 8, Column (D ) is entered in			Item 30, Column (B)	

#### SCHEDULE 6 - SALE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. U S TREASURY SECURITIES	0	34962370	34962370	34962370
<sub>2.</sub> BONDS	0	15375827	15375827	15375827
3. OTHER ASSETS	0	36477	36477	36477
4				
5. Totals from additional pages (if any)				
6. Totals of Lines 1 through 5	0	50374674	50374674	50374674
	7. Less Reinvestments			35595217
	8. Net Sales		1 4	7 7 9 4 5 7
The total from Line 8 is entered in				Item 49

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## SCHEDULE 7 – PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 0 0 0 - 3 1 4

	Book Value (C)	Cash Paid (D)
219	16717219	16717219
721	18841721	18841721
277	36277	36277
217	35595217	35595217
estments		35595217
ses		0
	ases	ases

#### **SCHEDULE 8 -- LOANS PAYABLE**

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			Repaymen	it Made l	During Period	
Source of Loans Payable at Any Time During the Reporting Period (A)	Loans Owed at Start of Period (B)	Loans Obtained During Period (C)	Cash (D)(1)		Other Than Cash (D)(2)	Loans Owed at End of Period (E)
None	0	0		0	0	
<u>.                                    </u>						
ı.						
5. Totals from additional pages (if any)						
5. Totals of Lines 1 through 5	0	0		0	0	
The total from Line 6 is entered in		Item 50	Item 70			Item 34 Column (D)

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#### SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 0 0 0 - 3 1 4

	(A) Name (List all persons who held office during the reporting period of they received no salary or other disbursements.)	even if	Gı (befo	ros: ore				d				bu or (			ents	3	Otl	her		1						
	(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	othe	r de		ctic			Allowances (E)			Bu		ess		1	Disburs ()	eme	nts				Γota (H)			
	BOYD BYRON		2	3	5	2	3	2	0	,		3 (	5	9	8	9			0		2	7	2	2	2	1
1.	PRESIDENT	С								ľ																
	THOMPSON, PAUL		1	6	1	0	2	6	0	,	4	4 (	5	3	3 .	7			0		2	0	7	3	6	3
2.	ASST PRESIDENT	С																								
	CARVER DONALD			9	5	3	1	5	0	)		2 8	3	8 .	2	3			0		1	2	4	1	3	5
3.	ASST TO PRES	С								ļ										S.						
	JOHNSON DANIEL		1	4	6	4	1	1	0	1	L 1	3 :	3	7 :	2	4			0		2	8	0	1	3	5
4.	GEN SEC & TREAS	c																								
	BRUNKENHOEFE JAMES		1	4	6	4	1	1	0	)		-	7	1	5 :	8			0		1	5	3	5	6	9
5.	NATL LEGIS DIR	С																								
	SECORD TIMOTHY		1	2	5	7	2	4	0		1	L 5	5 :	2	1	9			0		1	4	0	9	4	3
6.	CAN LEGIS DIR	С																								
	TENNANT DONALD			1	9	7	0	4	0	)   -		9	Ə	3 :	2 .	5			0			2	9	0	2	9
7.	ALT CAN LEG DIR	С																								
8.	Totals from additional pages (if any)	•	2 ′	1 4	ļ 5	2	1	3	0	6	3 2	2 6	) (	) ;	7 9	9			0		2	7	7 4	2	9	2
9.	Totals of Lines 1 through 8		3 (	7 (	<b>′</b> 5	0	3	6	0	9	) (	) (	6	3 5	5 ′	1			0		3 !	9 8	8 1	6	8	7
											10.	Les	ss C	Ded	ucti	ons		1	1	7		4	7	4		6
4.444	The total from Line 11 is entered in								Item 56		11.	Net	Di	sbu	ırse	men	ts		8	0	•	 3	9	4		1
*0	Code for Status (C): past officer - P; continuing officer - C; new office	er during ti	he repo	rting	pe	riod	- N	l.			(If a	any i	offic aan	er v	vas ion's	not el	ected at a	regula id byla	r ele ws. e	ction xplair	in ac	core	danc 75.)	e wi	th	

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(If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 75.)

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## SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 0 0 0 - 3 1 4

(A) Name (List all employees who received m from your organization and any affil	ore than \$10,000 in total disbursements liates.)		Gros fore			_			Disbursements for Official	Other	
(B) Position (Enter employee's job title.)			er o					Allowances	Business	Disbursements	Total
(C) Name of Affiliated Organization	(if applicable)			(D				(E)	(F)	(G)	(H)
ALLEN	REBECCA		3	4	0	5	7	0	o	0	34057
1. ACCOUNTING REP		!									
ANDERSON	HEATHER		1	2	9	7	0	0	7778	0	20748
2. SPEC REP		į									
ANDERSON	SHIRLEY		3	7	6	8	3	0	0	0	37683
3. PAYROLL ADMIN											
ARNOLD	ROY			7	3	3	2	0	6535	0	13867
4. SPEC REP										1	
ARNOLD	WADE		3	0	6	1	8	0	3 1	0	30679
5. PER COMPUTER TEC											
6. Totals from additional pages (if any)		6 6	- 6 9	1	6	9	9	0	791578	0	7483277
<ol> <li>Totals for all employees who, during the re \$10,000 or less in total disbursements fron any affiliates</li> </ol>	porting period, received n your organization and	8	3 2	3	7	8	7	0	353948	0	1177735
8. Totals of Lines 1 through 7		7	6	3 8	3 1	7	6	0	1159870	0	8798046
									9. Less Deductions	3 0	2 2 2 0 1
The total from Line 10 is entered in				·····				Item 57	10. Net Disburseme	ents 5 7	7 5 8 4 5
	<del>-</del>								<u> </u>		

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#### **SCHEDULE 11 - BENEFITS**

FILE NUMBER: 0 0 0 - 3 1 4

To Whom Paid (B)					t		
MEMBERS		1	0	5	8	0	0
MEMBERS	3	6	4	7	8	6	3
MEMBERS	2	8	0	3	1	6	9
UTUIA		2	6	6	5	0	9
	:	3 9	0	7	7	9	9
	1 (	7	3	1	1	4	0
	(B)  MEMBERS  MEMBERS  UTUIA	MEMBERS  MEMBERS  MEMBERS  2  UTUIA	(B)  MEMBERS 1  MEMBERS 3 6  MEMBERS 2 8  UTUIA 2  1 0 7	(B)     (C)       MEMBERS     1 0       MEMBERS     3 6 4       MEMBERS     2 8 0       UTUIA     2 6       3 9 0     3 9 0	(B)       (C)         MEMBERS       1 0 5         MEMBERS       3 6 4 7         MEMBERS       2 8 0 3         UTUIA       2 6 6         3 9 0 7	(B)     (C)       MEMBERS     1 0 5 8       MEMBERS     3 6 4 7 8       MEMBERS     2 8 0 3 1       UTUIA     2 6 6 5       3 9 0 7 7	(B) (C)  MEMBERS 1 0 5 8 0  MEMBERS 3 6 4 7 8 6  MEMBERS 2 8 0 3 1 6  UTUIA 2 6 6 5 0  3 9 0 7 7 9

## SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS

Description (A)	Amoun (B)	t		
1. NATIONAL MULTIPLE SCLEROSIS		2	5	0
2. NATIONAL RAILWAY LABOR CONF	2	5	0	0
3. LAKEWOOD HOSPITAL	;	2	0	0
4. THE DEBS FOUNDATION		5	0	0
5. MUSCULAR DYSTROPHY ASSOC		5	0	0
6. FRATERNAL ORDER POLICE L 25		4	0	0
7. Total from additional pages (if any)	1 2	3	0	0
8. Total of Lines 1 through 7	1 6	6	5	0
The total from Line 8 is entered in	Item 6	64		

## **SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE**

Description (A)					ount 3)	•		
1. BENEVOLET ACCOUNT					1	0	0	0
BOOKS PERODICALS 2. SUBSCRIPTIONS				7	5	4	2	3
3. BUREAU & ASSOCIATION DUES	  - 				3	2	1	9
4. BUTTONS & EMBLEMS				1	1	4	6	1
5. EMPLOYEE EDUCATION					7	4	8	3
6. DATA PROCESSING & SOFTWARE				9	0	4	4	0
7. Total from additional pages (if any)		3	5	6	5	4	8	5
8. Total of Lines 1 through 7		3	7	5	4	5	1	1
The total from Line 8 is entered in				. Ite	m 6	0		

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## **SCHEDULE 14 - OTHER RECEIPTS**

Description (A)					ount 3)	 t		
1. AMOUNTS UNAPPLIED INCOME				3	9	6	8	8
2. BOND DISCOUNT				6	6	4	6	8
3. CANADIAN NATIONAL				8	4	5	8	9
4. CREDIT CARD INCOME				1	5	6	3	3
5. EMPLOYEE SAVINGS BONDS				1	6	6	3	0
6.ESCROW ACCOUNT					2	0	3	8
7. GAIN LEDGER ASSETS			6	9	3	7	2	6
8. LABOR MANAGEMENT BOND			1	2	5	3	9	4
9. INTERNATIONAL DUES CHECK OFF			3	1	0	8	7	7
10. JOB BENEFIT PREMIUMS		3	2	8	5	3	4	0
11. JURY DUTY						1	7	5
12. ROBBERY & BURGLARY INS					3	5	2	1
13. REBATE							2	5
14. REIMBURSED OFFICE UTUIA		1	2	2	9	1	5	0
15. REIMBURSED OFFICERS SAL UTUIA			7	4	2	2	7	6
16. Total from additional pages (if any)	1	8	2	5	1	6	6	5
17. Total of Lines 1 through 16	2	4	8	6	7	1	9	5
The total from Line 17 is entered in				. Ite	m 5	4		

## SCHEDULE 15 - OTHER DISBURSEMENTS

Description (A)					oun 3)	t		
1.AMOUNTS UNAPPLIED				8	7	3	5	9
2.BOND PREMIUM AMORITZED				7	8	4	9	5
3.BUILDING MAINTENANCE					6	3	9	4
4.COACH EXPENSE				2	9	5	7	4
5.CONDOMINNIUM MAINTENANCE				1	1	4	3	3
6.DEFUNCT LOCAL ASSETS							3	3
7.EMPLOYEES SAVINGS BONDS				1	6	6	0	0
8.REGION MEETING			6	2	2	5	7	5
9.ESCROW ACCOUNT		·			2	0	6	6
10. INTERNATIONAL DUES CK/OFF			3	1	0	9	1	1
11.LOSS ON LEDGER ASSETS			6	7	4	1	4	8
12. UNAPPLIED LOCAL DUES CK/OFF		1	9	7	4	7	7	3
13. SPECIAL RETIREE HEALTH						2	6	4
SPECIAL PAYMENTS (DAMAGE 14.AWARDS)				8	3	6	6	7
15. TAXES				1	9	8	6	6
16. Total from additional pages (if any)	2	4	8	6	6	5	7	2
17. Total of Lines 1 through 16	2	8	7	8	4	7	3	0
The total from Line 17 is entered in				Ite	em 7	'3		

ORGANIZATION NAME: UNITED TRANSPORTATION UNION FILE NUMBER: 0 0 0 - 3 1 4

ENDING DATE OF PERIOD COVERED:

12/31/2002

#### SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name (List all persons who held office during the reporting period every they received no salary or other disbursements.)	n if	Gr (befo					, ]			sbı for			ents al	Other							
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	other		edu D)		ons	)	Allowances (E)		Βι	ısir (F		S	Disbursemer (G)	nts			To	-		
ARMSTRONG JOHN		1 2	2	5	7	2	4	0		1	5 2	2 (	5 2		0	1	4	0	9	8	6
VICE PRESIDENT	С																				
BOLING ROY		1 2	2	5	7	2	4	0		3	7 :	8 5	5 3		0	1	6	3	5	7	7
VICE PRESIDENT	С								ļ												
DRENNAN PATRICK		1 2	2	5	7	2	4	0		2	2 !	5 6	5 2		0	1	4	8	2	8	6
VICE PRESIDENT	С																				
FUTHEY MALCOLM		1 2	2	5	7	2	4	0		6	2	6 (	6 6		0	1	8	8	3	9	0
VICE PRESIDENT	С																				
HAKEY DAVID		1 2	2	5	7	2	4	0		3	9 (	6 :	L 3		O	1	6	5	3	3	7
VICE PRESIDENT	С						į							i							
IANNONE COSTANITIN		1 2	2	5	7	2	4	0		2	9 !	5 2	2 0		0	1	5	5	2	4	4
VICE PRESIDENT	С																				
MARCEAU RICHARD		1 2	2	5	7	2	4	0		5	8 9	9 2	2 9		0	1	8	4	6	5	3
VICE PRESIDENT	С																				
MARTIN III ARTHUR		1 3	3	8	4	4 :	2	0		4	7 3	3 9	9 6		0	1	8	5	8	3	8
VICE PRESIDENT	С																				

#### UNITED TRANSPORTATION UNION

ENDING DATE OF PERIOD COVERED:

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#### FILE NUMBER: 0 0 0 - 3 1 4

## SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

atus C)*	(bef	er d						1	TOL	OTI	icia		Other							
			(D)		on		Allowances (E)		Bu		ess		Disbursemen (G)	ts			Tota (H)			
- 1		2	4	8	2	2	0		1 (	) 4	8	6		0		3	5	3	0	8
														,						
	1	2	9	0	1	4	0		2 :	1 9	3	2		0	1	5	0	9	4	6
	1	2	5	7	2	4	0		1 !	5 6	5 5	1	<del></del>	0	1	4	1	3	7	5
_	1	2	5	7	2	4	0		2 9	9 9	6	7	···	0	1	<u> </u>	5	6	9	1
	1	2	5	7	2	4	0		1 8	3 2	1	1		0	1	4	3	9	3	5
	1	2	5	7	2	4	0		2 (	) 2	3	2		0	1	4	5	9	5	 6
	1	2	5	7	2	4	0		2 (	ŝ 4	0	5		0	1	5	2	1	2	 9
-				3	3	3	0		1	L 6	3	3	<del> </del>	0			1	9	6	— 6
		1 1	1 2	1 2 5	1 2 5 7  1 2 5 7  1 2 5 7  1 2 5 7	1 2 5 7 2  1 2 5 7 2  1 2 5 7 2  1 2 5 7 2	1 2 9 0 1 4  1 2 5 7 2 4  1 2 5 7 2 4  1 2 5 7 2 4  1 2 5 7 2 4  1 2 5 7 2 4	1 2 5 7 2 4 0  1 2 5 7 2 4 0  1 2 5 7 2 4 0  1 2 5 7 2 4 0	1 2 5 7 2 4 0  1 2 5 7 2 4 0  1 2 5 7 2 4 0  1 2 5 7 2 4 0	1 2 5 7 2 4     0 1 8       1 2 5 7 2 4     0 2 9       1 2 5 7 2 4     0 2 9       1 2 5 7 2 4     0 2 9       1 2 5 7 2 4     0 2 9	1 2 5 7 2 4     0 1 5 6       1 2 5 7 2 4     0 2 9 9       1 2 5 7 2 4     0 1 8 2       1 2 5 7 2 4     0 2 0 2       1 2 5 7 2 4     0 2 6 4	1       2       5       7       2       4       0       1       5       6       5         1       2       5       7       2       4       0       2       9       9       6         1       2       5       7       2       4       0       1       8       2       1         1       2       5       7       2       4       0       2       0       2       3	1 2 5 7 2 4 0 1 5 6 5 1  1 2 5 7 2 4 0 2 9 9 6 7  1 2 5 7 2 4 0 1 8 2 1 1  1 2 5 7 2 4 0 2 0 2 3 2	1 2 5 7 2 4       0 1 5 6 5 1         1 2 5 7 2 4       0 2 9 9 6 7         1 2 5 7 2 4       0 1 8 2 1 1         1 2 5 7 2 4       0 2 0 2 3 2         1 2 5 7 2 4       0 2 6 4 0 5	1 2 5 7 2 4 0 1 5 6 5 1 0  1 2 5 7 2 4 0 2 9 9 6 7 0  1 2 5 7 2 4 0 1 8 2 1 1 0  1 2 5 7 2 4 0 2 0 2 3 2 0  1 2 5 7 2 4 0 2 6 4 0 5 0	1 2 5 7 2 4 0 1 5 6 5 1 0 1  1 2 5 7 2 4 0 2 9 9 6 7 0 1  1 2 5 7 2 4 0 2 0 2 3 2 0 1  1 2 5 7 2 4 0 2 6 4 0 5 0 1	1 2 5 7 2 4       0 1 5 6 5 1       0 1 4         1 2 5 7 2 4       0 2 9 9 6 7       0 1 5         1 2 5 7 2 4       0 1 8 2 1 1       0 1 4         1 2 5 7 2 4       0 2 0 2 3 2       0 1 4         1 2 5 7 2 4       0 2 6 4 0 5       0 1 5	1 2 5 7 2 4       0 1 5 6 5 1       0 1 4 1         1 2 5 7 2 4       0 2 9 9 6 7       0 1 5 5         1 2 5 7 2 4       0 1 8 2 1 1       0 1 4 3         1 2 5 7 2 4       0 2 0 2 3 2       0 1 4 5	1 2 5 7 2 4 0 1 5 6 5 1 0 1 4 1 3  1 2 5 7 2 4 0 2 9 9 6 7 0 1 5 5 6  1 2 5 7 2 4 0 1 8 2 1 1 0 1 4 3 9  1 2 5 7 2 4 0 2 0 2 3 2 0 1 4 5 9  1 2 5 7 2 4 0 2 6 4 0 5 0 1 5 2 1	1 2 5 7 2 4       0 1 5 6 5 1       0 1 4 1 3 7         1 2 5 7 2 4       0 2 9 9 6 7       0 1 5 5 6 9         1 2 5 7 2 4       0 1 8 2 1 1       0 1 4 3 9 3         1 2 5 7 2 4       0 2 0 2 3 2       0 1 4 5 9 5         1 2 5 7 2 4       0 2 6 4 0 5       0 1 5 2 1 2

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UNITED TRANSPORTATION UNION

ENDING DATE OF PERIOD COVERED:

12/31/2002

## SCHEDULE 9 – ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name (List all persons who held office during the reporting period ever they received no salary or other disbursements.)	en if	Gross Salary (before taxes and		Disbursements for Official	Other	
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	other deductions) (D)	Allowances (E)	Business (F)	Disbursements (G)	Total (H)
BATTON JERRY		1 4 1 5 4 5	0	40290	0	1 8 1 8 3 5
ALT VICE PRES	C					
CANINO MICHAEL		5 4	0	3 3 2	0	3 8 6
ALT VICE PRES	Ç					
GONZALEZ ROVERT		8 9 9 3	U	2 3 5 0	0	1 1 3 4 3
ALT VICE PRES	P					
SCARSELLA CAROLYN		3 6 5 7 6	0	15806	0	5 2 3 8 2
ALT VICE PRES	С					
SHARPE ROBERT		1 3 2 9 4	U	25473	0	3 8 7 6 7
ALT VICE PRES	С	i i				
FITZGERALD JAMES		1 2 4 1 8	0	3 1 6 7	0	1 5 5 8 5
BOARD OF APPEAL	P					
GLEASON BRIAN		3 3 5 6	0	5 1 5 7	0	8 5 1 3
BOARD OF APPEAL	P					
HARFORD JAMES		3 4 0 9 1	0	20072	0	5 4 1 6 3
BOARD OF APPEAL	С					
			<u>.</u>			

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ORGANIZATION NAME:
UNITED TRANSPORTATION UNION

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## SCHEDULE 9 – ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name (List all persons who held office during the reporting period ever they received no salary or other disbursements.)	en if	Gross Salary (before taxes and		Disbursements for Official	Other	
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	other deductions) (D)	Allowances (E)	Business (F)	Disbursements (G)	Total (H)
MCLAFFERTY BARRY		3 6 9 1	0	7 3 7 4	0	1 1 0 6 5
BOARD OF APPEAL	С					
SAMPSON DIRK		2 5 7 0 2	0	1 2 4 9 2	0	3 8 1 9 4
BOARD OF APPEAL	С					
SEAGRIS EDWIN		2 0 1 3	0	3 8 0 4	0	5 8 1 7
BOARD OF APPEAL	P					
SHELTON JAMES		2 3 9 5 4	0	9818	0	3 3 7 7 2
BOARD OF APPEAL	P					
WELCH GLENN		2 4 0 4 0	0	1 1 8 9 9	0	3 5 9 3 9
BOARD OF APPEAL	С					
ANDERSON MICHAEL		3 4 3 7	0	4 4 8 5	0	7 9 2 2
EXECUTIVE BOARD	С					
BODA JR JOSEPH		1 7 4 5	0	1 2 7 4	0	3 0 1 9
EXECUTIVE BOARD	С					
DAWSON STEPHEN		1 7 4 6	0	7 9 4	0 :	2 5 4 0
EXECUTIVE BOARD	P					

Form LM-2 (Revised 2000)

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FILE NUMBER: 0 0 0 - 3 1 4

ENDING DATE OF PERIOD COVERED: 12/31/2002

#### SCHEDULE 9 – ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

other deductions) (D)  1 6 7 9  2 4 1 7	Allowances (E)	Business (F)  1 5 9 7	Disbursements (G)	
2 4 1 7				3 2 7 6
	0	1 8 2 8	0	:
	0	1828	0	
				4 2 4 5
3 1 6 3	0	2 7 4 9	0	5 9 1 2
				<u> </u>
	3 1 6 3	3 1 6 3 0	3 1 6 3 0 2 7 4 9	3 1 6 3 0 2 7 4 9 0

Form LM-2 (Revised 2000)

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ORGANIZATION NAME: FILE NUMBER: 0 0 0 - 3 1 4 UNITED TRANSPORTATION UNION

ENDING DATE OF PERIOD COVERED:

12/31/2002

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	i more than \$10,000 in total disbursements affiliates.) n (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
BANKSTON OPERATOR	BARBARA	40379	0	479	0	40858
BARRON	BRENDA	48572	0	0	0	48572
BASALLA DIRECTORY ADMIN	MARY	40952	0	0	0	40952
BASSIN ASST DIRECTOR	JACQUELINE	5 4 3 1 3	0	0	0	5 4 3 1 3
BELDEN STAFF COORDINATO	SCOTT	90146	0	1 2 2 4	0	91370

ORGANIZATION NAME:
UNITED TRANSPORTATION UNION

FILE NUMBER: 0 0 0 - 3 1 4

ENDING DATE OF PERIOD COVERED: 12/31/2002

(A) Name (List all employees who received more than \$10,000 in total from your organization and any affiliates.)  (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization (if applicable)	disbursements	Gros (before other o	e ta	xes ucti	an		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)			otal H)		
BENTLEY DANIEI SPC REP		1	l C	) 6	à 4	4	0	2510	0	1	1 (	3 1		5 4
BERK JACK ADMIN ASSST		7	7 2	2 0	) 3	9	0	0	0	7	7 2	2 (	)	3 9
BLACKBUR CHARLE DIR OF ACCOUNTIN	cs .	6	6 7	7 9	) 6	5	0	1950	0	6	5 9	9 9	•	1 5
BRANTLEY ROBERT	,	1	3	3 1	4	8	0	6017	0	1	1 9	 9 1	į (	5 5
BRODAR KEVIN ASSOC GEN COUNSE		1 2	2 4	- 5	2	5	0	14929	0	1 3	3 9	9 4	ļ :	5 4

UNITED TRANSPORTATION UNION

ENDING DATE OF PERIOD COVERED:

12/31/2002

#### SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received in from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gros (before other o	e tax	es a ictio	and	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)		Tota (H)			
BROWN AUDIT/UPDAT REP	DENISE	2	2 5	1	6 2	0	0	0	2	5	1	6	2
BRYANT PUBLIC REL REP	HARRY	4	4 8	9	1 6	0	0	0	4	8	9	1	6
CASHIN	KAREN	3	3 8	2	1 2	0	0	0	3	8	2	1	2
CLARK PROGR ANALYST	ELAINE	5	5 2	1	3 3	0	0	0	5	2	1	3	3
COCHRAN SPC REP	CARL		7	5	5 7	0	5943	0	1	3	5	0	0

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(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization	more than \$10,000 in total disbursements ffiliates.)	Gro (befor other		xes uct	s and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)			otal H)		
COLLANZ AUDIT/UPDAT REP	IRMA		3 1	1 7	7 0	1	0	0	0	,	3 1	1 7	7 1	0 1
COLLINS DIR OF FINANCE	STUART		2 5	5 6	3 0	1	0	7374	0		3 2	2 9	•	7 5
COX COORDINATOR D/IP	MORGAN		3 5	5 6	3 4	1	0	4988	0	2	4 (	) 6	3 :	2 9
CRUZ AUDIT/UPDAT REP	MIRIAM		2 3	3 1	9	1	0	0	0	2	2 3	3 1	<u> </u>	9 1
CUMBY ASST DIR YARDM	JAMES		8 0	) 7	' 5	8	0	52973	0	1 3	3 3	3 7	7 ;	3 1

UNITED TRANSPORTATION UNION

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#### FILE NUMBER: 0 0 0 - 3 1 4

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements liates.)	Gro (befor		axe luc	s ar	nd	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)		Tota (H)			
CUNNINGHAM SPC REP	MILES		3	4 :	5 (	0 5	0	13363	0	4	7	8	6	8
DAVISSON	RUSSELL		1 (	0	7 8	3 8	0	0	0	1	0	7	8	8
DE ARMAN BILLIANG AUDITOR	CHARLOTTE		5	1 (	0 6	3 2	0	0	0	5	1	0	6	2
DOLIN DIRECTOR INFO	MATTHEW		6 9	9	7 3	3 8	0	3093	0	7	2	8	3	1
DYSART SPC REP	DONALD		1 (	5 8	B (	0 6	0	5772	0	2	2	5	7	8

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#### SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gro (befo other		axe duc	s a	nd	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				tal 1)		
EAKIN PUB REL ASST	ERIC		4	9	5	1 6	0	1 2 6 5	0		5	5 C	7	. 8	3 1
ELLIOTT III  ASSOC GEN COUNSE	DANIEL		8 :	2	7 (	0 5	0	36203	0	1	1	 8 1	9	) (	 8 C
FELD SPC REP	ERIC		2 :	2	0 \$	5 7	0	27649	0		4	1 9	7	. (	— D 6
FIKAR D/IPP ADMIN	ROSEMARY		4 ;	8 (		1 9	0	0	0		4	1 8	6	<del></del>	1 9
FINK EXEC ASSIST PRES	JOHN		8 !	9 :	2 4	4 5	0	21088	0	1	1	ı 0	3	; 3	3 3

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#### SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

d more than \$10,000 in total disbursements affiliates.)	G (bef					,		Disbursements for Official	Other					
On (if applicable)	othe				ons)	)	Allowances (E)	Business (F)	Disbursements					
STEVEN		1	3	4	1	9	0	3993	0	1			1	2
MICHAEL		2	7	6	3	2	0	0	0	2	7	6	3	2
MARY		4	9	6	1	1	0	0	0	4	9	6	1	1
RICHARD		3	3	7	8	9	0	0	0	3	3	7	8	9
PAULA	- - - - - - - - - - - - -	4	9	4	9	6	0	4 4 9	0	4	9	9	4	5
	STEVEN  MICHAEL  MARY  RICHARD	ON (#applicable)  STEVEN  MICHAEL  MARY  RICHARD	MICHAEL  MICHAEL  MICHAEL  MICHAEL  MICHAEL  MARY  A	michael 2 7  Mary 4 9  RICHARD 3 3	(before taxes other deduction (D)  STEVEN  1 3 4  MICHAEL  2 7 6  MARY  4 9 6  RICHARD  3 3 7	(before taxes and other deductions) (D)  STEVEN  1 3 4 1  MICHAEL  2 7 6 3  MARY  4 9 6 1  RICHARD  3 3 7 8	(before taxes and other deductions) (D)  STEVEN  1 3 4 1 9  MICHAEL  2 7 6 3 2  MARY  4 9 6 1 1  RICHARD  3 3 7 8 9	(before taxes and other deductions)	(Defore taxes and other deductions) (D) (Happlicable) (D) (D) (Happlicable) (D) (D) (Happlicable) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	Chefore taxes and other deductions   Chefore taxes   C	Cetore taxes and other deductions   Allowances   Ep	Celore taxes and other deductions   Allowances   CE   CF   CF   Cisbursements   Tot   CF   CF   CF   CF   CF   CF   CF   C	Celebre taxes and other deductions on (# applicable)	Celtore taxes and other deductions of the reductions (E)   Allowances (E)   Control (F)   Control

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(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
HADDAD BILLING AUDITOR	LINDA	6 3 0 4 1	0	0	0	63041
HADDOX ASST ADJ D/IPP	ANGELIQUE	3 1 2 6 2	0	0	0	3 1 2 6 2
HAMMONDS OPERATIONS MGR	LARRY	5 2 9 9 8	0	0	0	5 2 9 9 8
HANN INVESTMENT REP	BARBARA	38954	0	0	0	38954
HATHCOCK ACCOUNTING REP	THERESE	3 6 4 2 4	0	0	0	3 6 4 2 4

UNITED TRANSPORTATION UNION

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		<u> </u>	<u> </u>		
(A) Name (List all employees who received more than \$10,000 in to from your organization and any affiliates.)	al disbursements Gross Salary (before taxes and		Disbursements for Official	Other	
(B) Position (Enter employee's job title.)	other deductions		Business	Disbursements	Total
(C) Name of Affiliated Organization (if applicable)	(D)	(E)	(F)	(G)	(H)
HERNDON JAME	1 5 3 8	4 0	9616	0	25000
SPECIAL REP					
HICKMAN FRAN	3 2 6 7	6 0	16656	0	49332
SPECIAL REP					
	JELYN 4977	0 0	0	0	49770
BILLING AUDITOR					
HORVATH JOHN	4 9 7 6	3 0	269	0	50032
P R ASSISTANT					
IMBROGNO JAME	2 5 4 4	1 0	0	0	25441
COMP OPERATOR					

UNITED TRANSPORTATION UNION

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(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.)  On (if applicable)	Gros (before other o	e ta	xes ucti	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)			otal H)		
KAISER EXC ASST GS&T	NANCY	3	3 6	6 4	1 2	0	0	7 0 1	0	3	3 7	' 1	2	2 1
KANE INVESTMENT REP	JANE	Ę	5 6	6 6	3 5	9	0	0	0	Ę	5 6	6		5 9
KARL ASST DIRECTOR	BRUCE	5	5 8	3 9	) 2	7	0	0	0	5	5 8	3 9	2	2 7
KEENE STRATEGIC PLANNE	STEVEN	8	3 4	1 6	5 8	0	0	3 1 2 6 9	0	1 1	1 5	5 9		<b>1</b> 9
KIGHT ASST DIRECTOR	JOYCE	5	5 5	5 0	) 6	1	0	0	0	Ę	5 5	5 0	6	3 1

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## SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received in from your organization and any aff (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements iliates.) (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
LEEK DIRECT BILL ADM	PATRICIA	3 6 4 1 1	0	0	0	3 6 4 1 1
LEWIS ASST DIRECTOR	JAMES	68680	0	50281	0	118961
LOCKE SPEC REP	ЈОНИ	0	0	29092	0	29092
LOUGH PORJECT COORD	DANIEL	69723	0	4860	0	7 4 5 8 3
MAJ ACCOUNTING REP	JANE	3 5 7 2 7	0	0	0	3 5 7 2 7

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(B) Position (Enter employee's job title.)			Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
MARINO SPEC REP	SAMUEL	10433	0	4230	0	1 4 6 6 3
MARTIN BILLING AUDITOR	CHRISTINE	58194	0	0	0	5 8 1 9 4
MAXWELL SPEC REP	TED	8730	0	7362	0	16092
MCDONALD ACCOUNTING REP	JANE	3 5 2 5 5	0	0	0	3 5 2 5 5
MCGINTY SECRETARY	CARA	48607	0	0	0	48607

ORGANIZATION NAME: UNITED TRANSPORTATION UNION FILE NUMBER: 0 0 0 - 3 1 4

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(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)  (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
MCGUIRE ADM ASST	CAROL	42005	0	139	0	42144
MCLUCAS ASST DIR	CARL	5 3 2 5 3	0	0	0	5 3 2 5 3
MCNEELEY  MEMBER RECORDS	KENIN	23936	0	0	0	23936
MICHEL AUDIT/UPDATE REP	GAIL	3 4 3 6 8	0	0	0	3 4 3 6 8
MILLER III GENERAL COUNSEL	CLINTON	195812	0	27839	0	223651

ORGANIZATION NAME:
UNITED TRANSPORTATION UNION

FILE NUMBER: 0 0 0 - 3 1 4

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(B) Position (Enter employee's job title.)			oss re ta dec	axe duc	s a	nd	Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)		To (F			
MILLER SECRETARY	JENNY		4	2 ;	8 :	2 6		0	5 5	0	4	2	8	8	1
MONAGHAN ADM ASST	SANDRA		4	2 ;	3 :	2 2		0	3538	0	4	5	8	6	0
MOORE TPEL ADMIN	OLGA		4 :	5 (	6 (	0 8		0	3 7	0	4		6	4	- · 5
MORENCY SPEC REP	LOUISE		1 (	0 :	5 (	6 0		0	0	0	1	0	5	6	0
SURR	STACIE		3 4	4 9	9 :	 5		0	0	0	3		9	5	4

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#### SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)  (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization (if applicable)		Gro (befor other	re ta	axe luc	s ar	nđ	All	Allowances (E)			sem ffici nes		Other Disbursements (G)		otal ∃)						
NADALIN DIRECTOR PLANNIN	JOHN		8 (	0	7 6	3 1		0	3	3	7	0 1	0	1	1	4	l 4	ļ <b>(</b>	6 2		
NEIGHBORS SECRETARY	TRACEY		4	7 :	5 2	2 2		0				0	0		4	7	' 5		2 2		
NITSCHKE DIR OPERATIONS	CARY		7 (	 D	7 4	4 6		0		2	5	7 8	0		7	' 3	3 3	3 2	2 4		
NOYES SPEC REP	STEPHEN	:	— 6	5 4	<b>4</b> 1	1 1		0	1	6	6	6 7	0		8	3 2	2 0	• 7	7 8		
OROS PROG ANALYST	JOSEPH		5 2	2	9 4	4 6		0				0	0		5	5 2	9	) 4	4 6		

FILE NUMBER: 0 0 0 - 3 1 4

ORGANIZATION NAME:
UNITED TRANSPORTATION UNION

FILE NUMBER: 0 0 0 - 3 1 4

ENDING DATE OF PERIOD COVERED: 12/31/2002

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)  (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
PACKER SPEC REP	MATHIAS	0	0	15433	0	15433
PALMER DIR RECORDS	GERARD	67009	0	1093	0	68102
PAPP AUDIT UPDTE REP	BARBARA	4 1 6 5 3	0	0	0	4 1 6 5 3
PARSELL ADMIN AID PRES	ELIZABETH	80538	0	31807	0	1 1 2 3 4 5
PETERSON SPEC REP	RICHARD	3 0 2 3 9	0	6372	0	36611

UNITED TRANSPORTATION UNION

ENDING DATE OF PERIOD COVERED:

12/31/2002

## SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

<ul> <li>(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</li> <li>(B) Position (Enter employee's job title.)</li> <li>(C) Name of Affiliated Organization (if applicable)</li> </ul>		Gr (befo	de	axe	s a	nd	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)		То (Н			
PIERCE DIR AUDIT UPDATE	SAMUEL		6	0	4	5 6	0	0	0	6	6 0	4	5	6
PIETRANGELO ADMIN ASST	TANIA		3	5	9 4	4 8	0	0	0	3	3 5	5 9	4	8 8
PROFFITT BILLING AUDITOR	LINDA		5	4	5 (	5 2	0	0	0	5	5 4	5	- 5	5 2
PSHOCK ACCOUNTING REP	PATRICIA		3	3	9 (	) 9	0	0	0	3	3	9	C	9
RASGAITIS SUPPLY REP	ТІМОТН		3	3	9 -	1 1	0	1 5	0	3	3 3	9	2	2 6

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ORGANIZATION NAME: UNITED TRANSPORTATION UNION

ENDING DATE OF PERIOD COVERED:

12/31/2002

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)  (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization (if applicable)		Gro (befor other		ces uctio	and		Allowances (E)	Disbursements for Official Business (F)			al	Other Disbursements (G)	nts To			al )		
RAUCH OPERATIONS MANG	DALE		4 5	2	9 6	3	0				0	0		4	5	2	9	6
REVELEY SPEC REP	STEVEN		7	4	8 5	5	0		6	5	5 7	0		1	4	0	4	2
RODRIGUEZ II SPEC REP	PABLO		1 1	3	3 (	)	0		3	8	6 9	0		1	5	1	9	9
ROOKARD PROJECT COORD	JOHN		9 0	3	8 0	)	0	5	4	5	3 2	0	1	4	4	9	1	2
SCHULER SPEC REP	DENNIS		1 3	3	7 6	3	0		2	8	5 7	0		1	6	2	3	3

ORGANIZATION NAME:
UNITED TRANSPORTATION UNION
ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 0 0 - 3 1 4

## SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)  (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)					Allowances (E)	Disbursements for Official Business (F)			al	Other Disbursements (G)			「ota (H)			
SHIVAK DIR SUPPLY	JOSEPH		4 (	5 8	B C	6	0				1 5	0	_	4	7	2	2	! 1
SNEED	CHERYL		6	1 9	9 9	7	0			- 7 (	3 4	0		6	2	7	3	1
SNYDER SPEC REP	DAVID		4	4 3	3 6	 3 7	0	1	2	8 3	3 3	0		1	7	2	0	0
SPALDING ACCOUNTING REP	PETER		1 6	5 7	7 0	) 2	0				0	0		1	6	7	0	2
SPANGLER ASST DIRECTOR	MARILYN		 5	5 5	5 C	) 3	0			•	0	0		5	5	5	0	3

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FILE NUMBER: 0 0 0 - 3 1 4

ENDING DATE OF PERIOD COVERED:

12/31/2002

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.)  (if applicable)	Gr (befo	r de	taxe	es a	anđ		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)		-	Tot (H			
SPELLACY BILLINGAUDITOR	KATHLEEN		6	2	1	8 2	2	0	0	0		6	2	1	8	2
STEM JR NATL LEGIS DIR	JAMES	1	2	5	7	2 4	4	0	42520	0	1	6	8	2	4	4
STOFFER BILLING AUDITOR	BONNIE		4	1	4	6 8	В	0	0	0		4	1	4	6	8
STOFFER ACCOUNTING REP	WILLIAM		3	1	8	1 (	6	0	0	0		3	1	8	1	6
STRAUB MANAGER SUPPLY	DAVID		3	6	7	7 (	3	0	0	0		3	6	7	7	6

DRGANIZATION NAME:	
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ENDING DATE OF PERIOD COVERED: 12/31/2002

(A) Name (List all employees who received more from your organization and any affiliated) (B) Position (Enter employee's job title.)	e than \$10,000 in total disbursements es.)	Gro (befo other	ded	xes uct	s an		Allowances	Disbursements for Official Business	Other Disbursements		To	tal		
(C) Name of Affiliated Organization	f applicable)	]	(D	) —			(E)	(F)	(G)		(⊢			
STRZELCZYK	ROBERT		1 3	3 (	7	4	0	14295	0	2	2 7	3	6	8 9
SPEC REP														
THOMPSON	STEVEN		1 8	3 7	7 8	4	0	6744	0	2	2 5	5	2	2 8
SPEC REP														
тотн	BARBARA		4 (	) 3	3 3	7	0	0	0	4	1 0	3	3	3 7
SECRETARY														
тотн	WILLIAM	]   	7 (	) 3	3 2	1	0	0	0	7	7 0	3	2	2 1
EXEC ASST GS&T														
TOWNSEND	HELEN		3 (	) 1	1 8	7	0	0	0	3	3 0	1	8	3 7
D BILL ADMIN														

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+	(E)	(F)	Disbursements (G)	Total (H)
7 2 5 4 7	0	43283	0	115830
38250	0	0	0	3 8 2 5 0
3 1 5 3 3	0	15216	0	46749
69067	0	19923	0	88990
7 5 4 8 7	0	0	0	7 5 4 8 7
	3 1 5 3 3	3 1 5 3 3 0	3 1 5 3 3 0 1 5 2 1 6 6 9 0 6 7 0 1 9 9 2 3	3 1 5 3 3 0 1 5 2 1 6 0 6 9 0 6 7 0 1 9 9 2 3 0

ORGANIZATION NAME:
UNITED TRANSPORTATION UNION

FILE NUMBER: 0 0 0 - 3 1 4

ENDING DATE OF PERIOD COVERED: 12/31/2002

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements affiliates.)	Gr (befo		axe Juc	s a	nd	A	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	ts Total					
ZANATH WEB PAGE DESIGN	ROBERT		4	3 :	2 <i>′</i>	1 2		0	431	0	4	1 3	3 6	. 4	1 3	
ZGREBNAK OPERATIONS MGR	WILLIAM		3	6 !	9 7	7 8		0	0	0	3	3 6	<u> </u>	7	7 8	
ANZIANO JR FIELD SUPERVISOR	THOMAS		1	1 (	 0	3 9		0	0	0	1		0	3	3 9	
CHAPPELL FIELD SUPERVISOR	LAWRENCE	Proprieta in the control of the cont	1	8 (	0 7	7 3		0	0	0	1		3 0	7	7 3	
CONDRAN FIELD SUPERVISOR	TERRY		1	3 2	2 4	 1 7		0	0	0	1	 I 3	3 2		1 7	

ORGANIZATION NAME:	
UNITED TRANSPORTATION	UNION

ENDING DATE OF PERIOD COVERED:

12/31/2002

### SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any)  (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
CUNNINGHAM  FIELD SUPERVISOR	JOSEPH	8 1 3 9	0	0	0	8 1 3 9
DECOSTE  FIELD SUPERVISOR	SERGE	4219	0	0	0	4219
HALE FIELD SUPERVISOR	SAMUEL	22837	0	0	0	22837
LEE FIELD SUPERVISOR	KENNETH	12704	0	0	0	12704
MCELLEY FIELD SUPERVISOR	EDWARD	7086	0	0	0	7086

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ORGANIZATION NAME:
UNITED TRANSPORTATION UNION

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### SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received a from your organization and any af (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) (if applicable)	(before t other de	axe	s and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total			
MORRISON II FIELD SUPERVISOR	MALCOM		6 4	4 3	9	0	0	0		6 4	4	39
PARKER FIELD SUPERVISOR	CLAYTON	1	1 2	2 3	0	0	0	0	1	1 :	2	3 0
SANDERSON FIELD SUPERVISOR	ANDREW		4	4 4	6	0	0	0		•	4	4 6
SPARKS FIELD SUPERVISOR	ROGER	1	2 \$	9 1	0	0	0	0	1	2 9	<del>-</del>	1 0
STRZELCZYK FIELD SUPERVISOR	ROBERT		,	3 1	7	0	0	0		,	3	1 7

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ORGANIZATION NAME:
UNITED TRANSPORTATION UNION
FILE NUMBER: 0 0 0 - 3 1 4

ENDING DATE OF PERIOD COVERED: 12/31/2002

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements liates.)	Gro (befo other		ixe: luct	s an		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	(H)				
SULLIVAN FIELD SUPERVISOR	JAMES		1	1 8	8 8	5	0	0	0	1	1	8	8	5
TOKACH FIELD SUPERVISOR	RONALD		1 (	 O ^	1 6	3	0	0	0	1	0	1	6	3
BLACKBURN II  COMMISSION REP  UTUIA	CHAARLES		1 (	3 (	) 4	5	0	0	0	1	6	0	4	5
BLACKBURN PENSION ADMIN UTUIA	BARBARA		5 2	2 8	3	7	0	0	0	5	2	8	3	7
BOYSKO  MARKETING SALE  UTUIA	LAURIE		4 (	7	7 0	7	0	7 4 4	0	4	1	4	5	1

ORGANIZATION NAME:

UNITED TRANSPORTATION UNION

ENDING DATE OF PERIOD COVERED:

12/31/2002

### FILE NUMBER: 0 0 0 - 3 1 4

(A) Name (List all employees who received mor from your organization and any affilia (B) Position (Enter employee's job title.)  (C) Name of Affiliated Organization (	e than \$10,000 in total disbursements les.)  If applicable)	Gr (befo	r de	axe	s and		Allowances (E)	Disbursements for Official Business (F)		ial	Other Disbursements (G)	(H)					
CONRAD  ACCOUNTING REP  UTUIA	WENDY		3	8	5 4	9	0			0	0	مسدست سائد فالمناسبة	3	8	5	4	9
COURTRIGHT CLAIMS ADJUSTER UTUIA	CHRISTINE		4	3	1 0	9	0			0	0		4	+ 3	1	C	9
DENNIS  DIR MARK & SALES  UTUIA	RALPH	1	1	4 8	8 9	4	0	2	4 7	2 9	0	1	3	9	6	2	3
DISSELL  MARKETING & SALE  UTUIA	KIMBERLY	V VI. read de Siller	3	4 !	 9 6	8	0			0	0		3	4	9	6	8
DURIC ASST UNDERWRITER UTUIA	PATRICIA		4	8	1 2	6	0		9	3 0	0		4	. 9	0	5	6

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	more than \$10,000 in total disbursements filiates.)	(beta		axe	s ar	nd		1	for O	ffici		Other					
(B) Position (Enter employee's job title.)	<u> </u>	othe			tion	s)	Allowances		Busi	nes	S	Disbursements			Tota		
(C) Name of Affiliated Organization	າ (if applicable)		(ι	)			(E)		(F	<u>=)</u>		(G)			(H)	)	
FLETCHER	JOSEPH		8	9 ;	3 3	3 9	0	2	2 2	1	1 6	0	1	1	1	4	5 5
MARKETING & SALE																	
UTUIA		İ						Ì									
GOODE	MARY		5	6	8 5	 5 3	0				0	0		5	6	8	5 3
ASST UNDERWRITER																	
UTUIA																	
HENGESBAUGH	GREGORY		2	5	1 3	3 6	0				0	0		2	5	1	3 6
PHS REP																	
AIUTU																	
JOHNSON	BONNIE		5	2	4 3	3 7	0			1	3 9	0		5	2	5	7 6
SEC HEAD PHS																	
UTUIA																	
KELLY	RITA		3	3 :	2 8	3 2	0			1	6 9	0		3	3	4	5 1
PHS REP																	
UTUIA																	
		L		_													

ORGANIZATION NAME:

UNITED TRANSPORTATION UNION

ENDING DATE OF PERIOD COVERED:

12/31/2002

### SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received in from your organization and any aff (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements filiates.) (if applicable)	Gr (befo	r ded	axe	es a	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
KRANICK  DIRECTOR  UTUIA	SANDRA		7	7	9	7 -	4	0	422	0	78396
MAJHER  MARKETING & SALE  UTUIA	DAVID		3	0	3	1 :	5	0	0	0	30315
MCCARTY  ASSOC GEN COUNSE  UTUIA	ROBERT		8	3	7	3 :	2	0	3 4 1 3	0	87145
MORAN-ZAREFO ASST DIRECTOR UTUIA	MARY	The same and the s	6	1	1	0	1	0	432	0	61533
PETSCH CLAIM REP UTUIA	LORA		3	2	0	8 (	0	0	0	0	3 2 0 8 0

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ORGANIZATION NAME:

UNITED TRANSPORTATION UNION

ENDING DATE OF PERIOD COVERED:

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### FILE NUMBER: 0 0 0 - 3 1 4

(A) Name (List all employees who received more the from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if approximately provided in the following support of the following sup		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
PIERCE ANNUITY ASST	CONNIE	29228	0	0	0	29228
REDMOND  PHS REP  UTUIA	THOMAS	3 2 4 1 0	0	0	0	3 2 4 1 0
ROBERTSON PHS REP UTUIA	CATHERINE	38565	0	0	0	3 8 5 6 5
RUB7Y CHIEF UNDERWRITE UTUIA	RICHARD	66099	0	6285	0	7 2 3 8 4
SCHMIDT  ASST DIRECTOR  UTUIA	PATRICIA	5 1 7 5 2	0	0	0	5 1 7 5 2

ORGANIZATION NAME:

UNITED TRANSPORTATION UNION

ENDING DATE OF PERIOD COVERED:

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### FILE NUMBER: 0 0 0 - 3 1 4

(A) Name (List all employees who received more the from your organization and any affiliates.)  (B) Position (Enter employee's job title.)		(before taxes and other deductions)	Allowances	Disbursements for Official Business	Other Disbursements	Total
(C) Name of Affiliated Organization (if ap.	olicable)	(D)	(E)	(F)	(G)	(H)
SHILEY AUDIT/UPDATE REP	PATRICIA	2 2 3 3 8	0	0	0	2 2 3 3 8
UTUIA						
STANISZEWSKI SENION TECH ADV UTUIA	LEON	65504	0	2 1 1 8	0	67622
TURCHAN  ACTUARIAL ASST  UTUIA	KAREN	4 5 2 7 2	0	0	0	45272
VINCI CLAIM ADJUSTER UTUIA	ELIZABETH	46692	0	0	0	46692
WIENS ASST CLAIMS ADJ UTUAI	TIMOTHY	37794	0	0	0	37794

ANIZATION NAME:	FILE NUMBER: 0 0 0 - 3 1 4
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ENDING DATE OF PERIOD COVERED: 12/31/2002

(A) Name (List all employees who received from your organization and any a	more than \$10,000 in total disbursements iffiliates.)	(before taxes and		Disbursements for Official Business	Other	
(C) Name of Affiliated Organization	n (if applicable)	other deductions) (D)	Allowances (E)	(F)	Disbursements (G)	Total (H)
woods	TIMOTHY	30356	0	0	0	30356
MARK & SALES REP					:	
UTUIA					10 to 10 to	
MORGANO	CARL;	3 2 4 7 8	0	0	0	3 2 4 7 8
MARK & SALES REP						
UTUIA						
			<u> </u>			<u></u>
					Î	
			!			
	· · · · · · · · · · · · · · · · · · ·		;			•
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### SCHEDULE 11 - BENEFITS (continued)

Description (A)	To Whom Paid (B)					t		
HEALTH & WELFARE	UNITED HEALTHCARE	2	3	3	7	0	0	8
VISION CARE	VISION SERVICE PLAN			5	1	3	9	1
SUPPLEMENTAL LIFE INSURANCE	IMPERIAL LIFE COMPANY			1	0	7	0	3
BENEFIT TAXES	IMPERIAL LIFE COMPANY	ĺ			3	1	5	6
DENTAL	METLIFE		1	1	1	2	3	0
TRAVEL ACCIDENT	CIGNA LIFE INS COMPAY				3	7	2	8
PENSION	UTU SEGREGATED PENSION FD	1 3 1 5 7 7				7	9	
CANADIAN RETIREMENT PLAN VARIOUS CANADIAN BANKS				7	4	8	0	4
						***		
		5 1 3 1 0 3 1 1 1 1 3 3 7 0 1 3 1 5						
			2 3 3 7 0 5 1 3 1 0 7 3 1 1 1 1 2 3 7 1 3 1 5 7					
				•				

	_	_	_		_			
FILE NUMBER:	0	0	0	-	3	1	4	

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12/31/2002

### SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS (continued)

SCHEDULE 12 CONTI	VIDO HONO,		••••	
Description (A)	Amount (B)			
AMERICAN PASSENGER RAIL COALIT		8	0	0
NATIONAL RR LIBRARY	6	0	0	0
UNITED WAY CAMPAIGN	3	0	0	0
RENASCENT CENTER ADMIN	1	0	0	0
MELVILLE COMMITTEE	1	5	0	0
				*

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ORGANIZATION NAME:

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12/31/2002

### SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE (continued)

Description (A)			ount 3)			
DEPRECIATION EXPENSE		6	4	4	0	0
DIRECTORY COAST			7	0	9	1
FREIGHT EXPRESS		9	2	3	3	4
FLECTRICAL EQUIPMENT PURCHASES			4	1	7	9
FURNITURE PURCHASES		3	3	9	2	5
INTERNATIONAL EXCHANGE			1	7	9	4
INVESTMENT EXPENSE		1	5	8	8	1
BANK SERVICE CHARGES		3	8	3	3	2
LOCAL AUDITING EXPENSE		1	3	5	7	8
MICROFICHE EXPENSE		5	4	8	8	8
MEETING EXPENSE	6	3	0	8	5	5
MOVING EXPENSE		2	7	8	4	8
OUTSTANDING ITEMS			1	1	5	0
TPEL EXPENSE		1	2	0	6	3
POSTAGE	2	9	5	7	9	8
PRINTING		5	0	3	2	9
PROGRAMMING EXPENSE	1	0	2	2	4	9
RENT	4	3	2	5	0	0

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### **SCHEDULE 13 – OFFICE & ADMINISTRATIVE EXPENSE** *(continued)*

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		••••	• • • •		,	•••
Description (A)			ount B)			
MAINTENANCE CONTRACTS		4	6	5	9	8
RENT & MAINTENANCE LEASED EQUI	1	6	8	2	8	5
REPAIRS	1	3	4	7	2	5
TRAVEL CHARGED	4	9	0	3	6	7
PERSONAL PORPERTY TAX		1	9	3	7	1
STATIONERY & SUPPLIES	2	0	1	2	6	4
LIABILITY INSURANCE			6	0	8	4
INS WORKMANS COMPENSATION		9	7	4	1	7
LABOR MANAGEMENT BOND		8	3	3	5	4
TELEPHONE	3	7	9	9	4	3
TIME BOOKS		4	6	5	4	9
UTILITIES		1	2	3	3	4
						_

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### SCHEDULE 14 – OTHER RECEIPTS (continued)

Description (A)					ount B)			
REIMBURSED SALARIES EMPL UTUIA		2	2	1	4	5	8	0
REIMBURSED OFFICE EXP D/IPP	į		2	8	8	9	7	8
REIMBURSED EXP				7	3	4	7	7
REFUND DEPOSIT/INTEREST		•		4	5	3	1	1
REGION MEETING INCOME			6	7	1	3	7	1
REPRODUCING RECORDS						1	9	0
RETIREE HEALTH & WELFARE PREM			7	1	3	5	3	0
ROYALITIES					·	1	5	2
TRSF FUNDS D/IPP TO GEN FD	1	2	1	9	3	1	3	7
TAX REFUNDS						2	7	0
UNAPPLIED LOCAL DUES CK/OFF		2	0	5	0	6	6	9
		-						
		_						
							•	
		_						

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### SCHEDULE 15 - OTHER DISBURSEMENTS (continued)

Description (A)					ouni B)	<del></del>	. <u></u>	_
TRANSFER JB/ISP FUND TO D/IPP	2	4	0	3	7	0	6	0
PAYROLL DEDUCTIONS OFFICERS			1	3	1	2	5	8
PAYROLL DEDUCTIONS EMPLOYEES			6	9	8	2	5	4
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	-							
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		<u>.</u> .					_ <del></del>	
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ORGANIZATION NAME: JNITED TRANSPORTATION UNION	
NDING DATE OF PERIOD COVERED:	

# SCHEDULE 5 - FIXED ASSETS: BUILDINGS (continued)

Description of Buildings (give location) (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
ALEXANDRIA VA	5 1 4 8 2 3	5 4 4 7 6	4 6 0 3 4 7	514000
				_
				_ <del></del>

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# United Transportation Union ' Line 75 Additional Information

# Item Number Description

7

United Transportation Union	D EIN#	34-1905538
Segregated Pension Fund	Plan #	001
14600 Detroit Avenue		
Cleveland OH 44107		

- Audited by Ernst & Young, P.O. Box 901247, Cleveland, OH 44190 4
- The UTU has pledged marketable securities (Bonds) with value of approximately UTU officers use credit cards and employees for travel expenses in accordance with UTU accounting procedures. Credit card balances are paid in full each \$1 million to secure purchases attributed to UTU Corporate credit cards. month. 23
- to its operations. In the opinion of management and counsel, the Union believes The Union is party to various legal proceedings and the contingencies incidental it has adequate defenses to its suits and other claims, however, there is always potential liability for damages in most lawsuits.

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established a trust for the JBF/ISP; contributed \$22,631,258.34 to the JBF/ISP approximately \$2.9 million and has paid a penalty to the DOL in the amount of On July 8,2002 and July 10, 2002, respectively, UTU and the Secretary of the JBF/ISP trust to a trust established by UTU for a new plan known as the UTU DOL will not pursue any claims against UTU with respect to the JBF/ISP and settling issues arising out of the UTU's maintenance of the Job Benefit Fund/ trust; terminated the JBF/ISP trust and transferred \$11,804,271.00 from the No other penalty was imposed on UTU in connection with the JBF/ISP. It is Discipline/Income Protection Program ("DIPP"); and returned the remaining \$55,000 for delinquent filing of Annual Reports with respect to the JBF/ISP. agreement, UTU is in the process of paying to certain JBF/ISP participants the opinion of management and counsel that, as a result of the Agreement, \$10,826,987.34 in the JBF/ISP trust to UTU. In addition, as a result of the income Security Program ("JBF/ISP"). Pursuant to the Agreement, UTU representatives, executed a written settlement agreement ("Agreement") United States Department of Labor ("DOL"), through their authorized that there is little or no likelihood that any other claims will be pursed successfully against the Union in connection with the JBF/ISP.

> Sch 9 Payments To Officers

Union Insurance Association (UTUIA). The UTUIA is a fraternal benefit society domiciled in Ohio. The Insurance Associations primary business is providing A portion of certain Officers salaries were paid by the United Transportation life, accident and health insurance and annuities to members of the United Transportation Union (UTU) and members of certain other transportation



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# United Transportation Union Line 75 Additional Information

industries. The payments made by the UTU are detailed on the appropriate attachment for Schedule 9.

> Sch 10 Payments to Employees

In addition to paying a portion of the Officer's salaries, the UTUIA also paid a portion of certain employee's salaries and expenses. The salaries and expenses paid by the UTU to Employees re detailed in the appropriate attachment for schedule 10.

> Statement A Line 25

Reported in schedule 13 Depreciation Expense of \$64,000 does not flow through line 25 Reported in schedule 10 are United Transportation Union employees paid directly from our United Transportation Union Insurance Association for a total of \$1,514,916.

